Quantity Purchase Agreement Qty Purchase Agreement QPA Number With The State Of Indiana 0000000000000000000013329

Vendor CRIBS FOR KIDS INC CRIBS FOR KIDS Remit to:

5450 SECOND AVE PITTSBURGH PA 15207

CRIBS FOR KIDS INC Name and Address CRIBS FOR KIDS of Vendor: 5450 SECOND AVE PITTSBURGH PA 15207

Page 1 of 1

Safe Sleep Survival Kits Requisition Nbr.:

Effective Date: 01/01/2015 **Expiration Date:** 12/31/2015

Agency Number:

Facility: ASA-5-13329 Vendor ID: 0000297306

Vendor Telephone Nbr: Name Of Contact Pers: Contact Email:

FAX Number:

In accordance with your bid, submitted in response to the above referenced solicitation, the Vendor agrees that the Indiana Department of Administration, Procurement Division, has the option to purchase the items listed below under the terms of this agreement.

The Vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration of the QPA but issued prior to the expiration date. The quantity listed herein is an estimate of the requirements. The state may order substantially more or substantially less pursuant to the terms of this agreement. Orders are to be delivered only upon receipt of properly approved Quantity Purchase Award Release.

Line Number Quantity

UNIT

Article and Description

Unit Price

79.9900

This is an award of a Quantity Purchase Agreement for Safe Sleep Survival Kits. QPA can be mutually renewed yearly for three additional years.

Vendor Contact Information:

Company Representative: Barbara Clemons, Director of Product Distribution

Phone: 412.322.5680 Ext 107 E-mail: BClemons@cribsforkids.org

State of Indiana QPA Contact Information:

Contract Manager: Katherine L. Harrington, CPPB

Phone: 317.232.8115

E-mail: kharrington@idoa.in.gov

The vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration date, but issued prior to the expiration date, and postmarked no later than 14 business days after the QPA's expiration date.

Quantities were estimated and actual usage could be substantially more or less.

The awarded vendor must maintain, at a minimum the information listed below in excel format and supplied to the State within one week of the request.

The report must include purchases from State Agencies and any Political Subdivision's purchases.

- **Entity Name**
- Entity Address
- * Date of Order
- Purchase Order Number
- Description of Goods Ordered
- Quantity

2

Order Total

99,999,999.00 KT 00000000100231648 Safe Sleep Survival Kit shall include: Graco Pack 'N' Play, Pack 'N' Sheet w/Safe Sleep Msg, Halo Sleep Sack, Philips Soothie Pacifier, Safe Sleep Educational Material, Safe Sleep DVD (10 minutes) and

Misc Items

Telephone: (317) 232-3150

The following UN/CEFACT Unit of Measure Common Codes are used in this document:

ΚT Kit

Signature of Purchasing Officer	Typed Name	Signature Of Approval Office Of the State Attorney General	
	Date Signed	Typed Name	Date Signed
Authorized Signature Indiana Department Of Administration Procurement Division 402 West Washington Street, Rm W468 Indianapolis, Indiana 46204			